



09-08-03

GP 2142
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Serial No. : 10/092,158

Filing Date : March 5, 2002

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Sharon L. Ford



EV 315 183 317 US

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TRANSMITTAL FORM

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Total Number of Pages in This Submission

11

Application Number

10/092,158

Filing Date

March 5, 2002

First Named Inventor

Weis, Evan F., et al.

Art Unit

2142

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SEP 09 200

Examiner Name

Geckil, Mehmet B.

Technology Center 2100

Total Number of Pages in This Submission

11

Attorney Docket Number

IMM062C

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	Express Mail Certificate (EV 315 183 317 US); Transmittal Letter; Check # 340607 for \$174; Return Post Card.
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<input type="checkbox"/> Certified Copy of Priority Document(s)	<input checked="" type="checkbox"/> CD, Number of CD(s) 1	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		Remarks
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	John C. Alemany (Reg. No. 47,384)
Signature	
Date	September 5, 2003

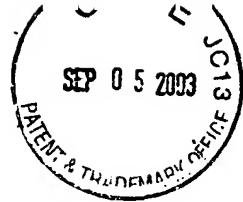
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I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

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Date	

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Serial No. 10/092,158
Express Mail Cert. No. EV 315 183 317 US
Page 1

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: : Weis, Evan F., et al.

Serial No.: : 10/092,158

For: : DEFINING FORCE SENSATIONS
ASSOCIATED WITH GRAPHICAL
IMAGES

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Filed: : March 5, 2002

SEP 0

Examiner: : Geckil, Mehmet B.

Technology Center 2100

Group Art Unit: : 2142

Mail Stop: Non-Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

TRANSMITTAL LETTER

Sir:

Transmitted herewith are copies of the following document(s) for filing in the above-identified application:

Express Mail Certificate (EV 315 183 317 US)
Amendment and Response Under 37 CFR § 1.111
IDS CD (85 References)
Check # 340607 for \$174.00
Return Post Card

Shown below are the fees for the presentation of the amended claims:

		Highest #			
	Claims	Previously			
	Remaining	Paid For	Extra	Rate	Fee
TOTAL	27	22	5	\$18	\$90
Ind. Claims	4	3	1	\$84	\$84

Multiple Dependent Claim Added..... NO

TOTAL \$174

The Commissioner is hereby authorized to charge any fee due for the above action, or credit any overpayment to Deposit Account Number 16-1435. A duplicate of this transmittal is attached for that purpose.

Respectfully submitted,


John C. Alemanni
Attorney for Applicant
Registration No. 47,384

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